

Application No. (if known): 10/787,269

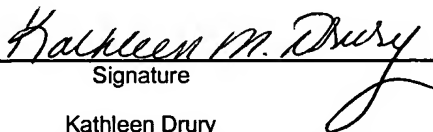
Attorney Docket No.: 58102DIV(71987)

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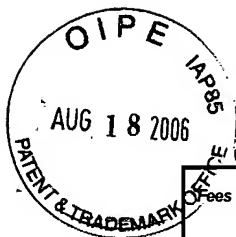
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Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
Fee Transmittal (1 page)
Amendment dated 8.18.06 (9 pages)
Charge \$1,810.00 to deposit account 04-1105



PTO/SB/17 (01-06)

OMB 0651-0032

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 1,810.00**Complete if Known**

Application Number	10/787,269
Filing Date	February 25, 2004
First Named Inventor	C. Huang
Examiner Name	P. Cao
Art Unit	2814
Attorney Docket No.	58102 DIV (71987)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	Fee (\$)	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
		Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
27	-30 = 0	x	=

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	-3 = 0	x	=

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for Response Within First Month
1801 Request for Continued Examination**Fees Paid (\$)**1020.00
790.00**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	42,693	Telephone	(617) 439-4444
Name (Print/Type)	Steven M. Jensen	Date	August 18, 2006		